

# CLAIMS ONLY

185

Application Number

09996346

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2				/		
3				/		
4				/		
5				/		
6				/		
7				/		
8				/		
9				/		
10				/		
11				/		
12				/		
13				/		
14				/		
15				/		
16				/		
17				/		
18				/		
19				/		
20				/		
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23				/		
24				/		
25				/		
26				/		
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30				/		
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50						
Total Indep						
Total Depend						
Total Claims						

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Dep
51						
52						
53						
54						
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95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						

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285

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CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
/ 0 1						
/ 0 2						
/ 0 3						
/ 0 4						
/ 0 5						
/ 0 6						
/ 0 7						
/ 0 8						
/ 0 9			/			
/ 1 0				/		
/ 1 1				/		
/ 1 2				/		
/ 1 3				/		
/ 1 4				/		
/ 1 5				/		
/ 1 6				/		
/ 1 7				/		
/ 1 8				/		
/ 1 9				/		
/ 2 0				/		
/ 2 1				/		
/ 2 2				/		
/ 2 3				/		
/ 2 4				/		
/ 2 5				/		
/ 2 6				/		
/ 2 7				/		
/ 2 8				/		
/ 2 9				/		
/ 3 0				/		
/ 3 1				/		
/ 3 2				/		
/ 3 3				/		
/ 3 4				/		
/ 3 5				/		
/ 3 6				/		
/ 3 7				/		
/ 3 8				/		
/ 3 9				/		
/ 4 0				/		
/ 4 1				/		
/ 4 2						
/ 4 3						
/ 4 4						
/ 4 5						
/ 4 6						
/ 4 7						
/ 4 8						
/ 4 9						
/ 5 0						
Total						
Indep						
Total						
Depend						
Total						
Claims						

  

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Dep
/ 5 1						
/ 5 2						
/ 5 3						
/ 5 4						
/ 5 5						
/ 5 6						
/ 5 7						
/ 5 8						
/ 5 9						
/ 6 0						
/ 6 1						
/ 6 2						
/ 6 3						
/ 6 4						
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/ 6 7						
/ 6 8						
/ 6 9						
/ 7 0						
/ 7 1						
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/ 7 8						
/ 7 9						
/ 8 0						
/ 8 1						
/ 8 2						
/ 8 3						
/ 8 4						
/ 8 5						
/ 8 6						
/ 8 7						
/ 8 8						
/ 8 9						
/ 9 0						
/ 9 1						
/ 9 2						
/ 9 3						
/ 9 4						
/ 9 5						
/ 9 6						
/ 9 7						
/ 9 8						
/ 9 9						
/ 1 0 0						
Total						
Indep						
Total						
Depend						
Total						
Claims						

# CLAIMS ONLY

3 of 5

Application Number

09996346

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments		* May be used for additional claims or amendments		* May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Dep
201							251					
202							252					
203							253					
204							254					
205							255					
206							256					
207							257					
208							258					
209							259					
210							260					
211							261					
212							262					
213							263					
214							264					
215							265					
216							266					
217			/				267					
218				/			268					
219				/			269					
220				/			270					
221				/			271					
222				/			272					
223				/			273					
224				/			274					
225				/			275					
226				/			276					
227				/			277					
228				/			278					
229				/			279					
230				/			280					
231				/			281					
232				/			282					
233				/			283					
234				/			284					
235				/			285					
236				/			286					
237				/			287					
238				/			288					
239				/			289					
240				/			290					
241				/			291					
242				/			292					
243				/			293					
244				/			294					
245				/			295					
246				/			296					
247				/			297					
248				/			298					
249				/			299					
250				/			300					
Total							Total					
Indep							Indep					
Total							Total					
Depend							Depend					
Total							Total					
Claims							Claims					

485

Application Number  
09496346

**Applicant(s)**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
301						
302						
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325			1			
326				1		
327				1		
328				1		
329				1		
330				1		
331				1		
332				1		
333				1		
334				1		
335				1		
336				1		
337				1		
338				1		
339				1		
340				1		
341				1		
342				1		
343				1		
344				1		
345				1		
346				1		
347				1		
348				1		
349				1		
350				1		
Total Indep			4			
Total Depend			125			
Total Claims			125			

## CLAIMS ONLY

5 of 5

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Application Number  
09996346

Filing Date

**Applicant(s)**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
401						
402						
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Total Indep						
Total Depend						
Total Claims						

	Indep	Depend	Indep	Depend	Indep	Dep
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Total Indep						
Total Depend						
Total Claims						